

**MARINETTE COUNTY COMMITTEE MEMBER**  
**EXPENSE ACCOUNT STATEMENT**

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**TOTAL EXPENDITURE** -

## CLAIMANT'S STATEMENT

I declare, under penalties of perjury, this account of expenses is true and correct and in conformity with Marinette County's reimbursement of expense policy. This claim represents reasonable and actual expenses necessarily incurred by me personally in the performance of my duties. I also declare, the meal reimbursement listed meets the definition of a business meal deduction as defined under IRS Publication 463

Date	Claimant's Signature
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Approved By \_\_\_\_\_

### Lodging Reimbursement Maximum

2023 State of Wisconsin standard rate :  
1/1/23 - 12/31/23 \$96.00 per night

The maximum allowed for overnight lodging shall be the current State rate unless that rate is unavailable. If the State rate is unavailable, reimbursement shall be based on the receipt amount.

### Mileage Reimbursement Maximum

Subject to current IRS rate 1/1/23 - 12/31/23	\$0.655 per mile
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